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What Is Claimed Is:

1. A co-therapy for treating a cardiovascular disorder in a subject, wherein said co-therapy comprises administering a therapeutically-effective amount of an angiotensin converting enzyme inhibitor and administering an aldosterone antagonist in an amount therapeutically effective to antagonize aldosterone to reduce the death rate or the number of non-fatal hospitalizations as compared to monotherapy with an angiotensin converting enzyme inhibitor.

2. The co-therapy of Claim 1 further characterized by administering said angiotensin converting enzyme inhibitor and said aldosterone antagonist in a sequential manner.

3. The co-therapy of Claim 1 further characterized by administering said angiotensin converting enzyme inhibitor and said aldosterone antagonist in a substantially simultaneous manner.

4. The co-therapy of Claim 1 wherein said aldosterone antagonist is a spirolactone-type compound.

5. The co-therapy of Claim 4 wherein said spirolactone-type compound is spironolactone.

6. The co-therapy of Claim 1 wherein said angiotensin converting enzyme inhibitor is selected from the group consisting of alacepril, benazepril, captopril, cilazapril, delapril, enalapril, enalaprilat, fosinopril, fosinoprilat, imidapril, lisinopril, perindopril, quinapril, ramipril, saralasin acetate, temocapril, trandolapril, ceranapril, moexipril, quinaprilat, spirapril, Bioproject BP1.137, Chiesi CHF

1514, Fisons FPL-66564, idrapril, Marion Merrell Dow MDL-100240, perindoprilat and Servier S-5590.

7. The co-therapy of Claim 6 wherein said angiotensin converting enzyme inhibitor is selected from the group consisting of alacepril, benazepril, captopril, cilazapril, delapril, enalapril, enalaprilat, fosinopril, fosinoprilat, imidapril, lisinopril, perindopril, quinapril, ramipril, saralasin acetate, temocapril, trandolapril, ceranapril, moexipril, quinaprilat and spirapril.

8. The co-therapy of Claim 1 further characterized by said angiotensin converting enzyme inhibitor and said aldosterone antagonist being used in said co-therapy in a weight ratio range from about 0.1-to-one to about twenty-five-to-one of said angiotensin converting enzyme inhibitor to said aldosterone antagonist.

9. The co-therapy of Claim 8 wherein said weight ratio range is from about 0.5-to-one to about fifteen-to-one.

10. The co-therapy of Claim 9 wherein said weight ratio range is from about 0.5-to-one to about five-to-one.

11. The co-therapy of Claim 9 wherein said angiotensin converting enzyme inhibitor is captopril, in a daily dose range from about 30 mg to about 80 mg per dose, or is enalapril in a dose range from about 5 mg to about 25 mg per dose.

12. The co-therapy of Claim 11 wherein said aldosterone antagonist is spironolactone in a daily dose range from about 1 mg to about 23 mg per dose.

13. The co-therapy of Claim 12 wherein said spironolactone daily dose is in a range from about 5 mg to about 20 mg.

14. The co-therapy of Claim 12 wherein said spironolactone daily dose is in a range from about 5 mg to about 15 mg.

15. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination result in a statistically significant reduction in the death rate or the number of non-fatal hospitalizations as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

16. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination result in a statistically significant reduction in the death rate as

compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

17. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination result in a statistically significant reduction in the number of non-fatal hospitalizations as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

18. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination result in a statistically significant reduction in the rate of deaths resulting from sudden death in subjects afflicted with or susceptible to elevated heart rate variability as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

19. A combination therapy for treating a cardiovascular disorder in a subject, wherein said

combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination result in a statistically significant reduction in the death rate for deaths resulting from progression of heart failure as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

20. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination result in a statistically significant reduction in the death rate or the number of non-fatal hospitalizations in subjects having a left ventricular ejection fraction greater than about 26% as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

21. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are

administered at doses that in combination result in a statistically significant reduction in the death rate or the number of non-fatal hospitalizations in subjects having a left ventricular ejection fraction less than about 26% as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

22. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering an angiotensin converting enzyme inhibitor, an aldosterone antagonist and a loop diuretic to the subject, and wherein the angiotensin converting enzyme inhibitor, the aldosterone antagonist and the loop diuretic are administered at doses that in combination suppress clinically significant cough due to elevated pulmonary arterial fibrosis or low levels of pulmonary blood pressure in the subject as compared to said combination therapy without the aldosterone antagonist, and wherein said loop diuretic has no substantial aldosterone antagonistic effect.

23. The combination therapy of Claim 22 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist and loop diuretic are administered at doses that in combination result in a statistically significant reduction in the death rate or the number of non-fatal hospitalizations as compared to said combination therapy without the aldosterone antagonist.

24. A combination therapy for treating a cardiovascular disorder in a subject, wherein said combination therapy comprises administering a

therapeutically-effective amount of an angiotensin converting enzyme inhibitor, a therapeutically-effective amount of an aldosterone antagonist, a therapeutically-effective amount of a loop diuretic and a therapeutically-effective amount of digoxin to the subject.

25. The combination therapy of Claim 24 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist, loop diuretic and digoxin are administered at doses that in combination result in a statistically significant reduction in the death rate as compared to the combination therapy of Claim 16.

26. The combination therapy of Claim 24 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist, loop diuretic and digoxin are administered at doses that in combination result in a statistically significant reduction in the number of non-fatal hospitalizations as compared to the combination therapy of Claim 17.

27. The combination therapy of Claim 24 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist, loop diuretic and digoxin are administered at doses that in combination result in a decrease in blood N-terminal atrial natriuretic factor level in the subject as compared to the combination therapy of Claim 15.

28. The combination therapy of Claim 24 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist, loop diuretic and digoxin are administered at doses that in combination result in a decrease in blood procollagen type III aminoterminal propeptide

level in the subject as compared to the combination therapy of Claim 15.

29. The combination therapy of Claim 24 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist, loop diuretic and digoxin are administered at doses that in combination result in an increase in left ventricular ejection fraction in the subject as compared to the combination therapy of Claim 15.

30. The combination therapy of Claim 15 wherein the subject is a human.

31. The combination therapy of Claim 15 wherein the subject is susceptible to sudden death.

32. The combination therapy of Claim 15 wherein the subject is classified in New York Heart Association class III or class IV prior to combination therapy.

33. The combination therapy of Claims 15 wherein the subject has a left ventricular ejection fraction greater than about 26%.

34. The combination therapy of Claim 15 wherein the subject has a left ventricular ejection fraction less than about 26%.

35. The combination therapy of Claim 15 wherein the subject is susceptible to or suffering from clinically significant cough due to elevated pulmonary

arterial fibrosis or low levels of pulmonary blood pressure.

36. The combination therapy of Claim 15 wherein the loop diuretic is selected from furosemide and ethynacrylic acid.

37. The combination therapy of Claim 15 further comprising the administration of a therapeutically-effective amount of digoxin.

38. The combination therapy of Claim 15 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist and loop diuretic are administered at doses that in combination result in a decrease in blood N-terminal atrial natriuretic factor level in the subject as compared to the combination therapy of Claim 15.

39. The combination therapy of Claim 15 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist and loop diuretic are administered at doses that in combination result in a decrease in blood procollagen type III aminoterminal propeptide level in the subject as compared to the combination therapy of Claim 15.

40. The combination therapy of Claim 15 wherein the angiotensin converting enzyme inhibitor, aldosterone antagonist and loop diuretic are administered at doses that in combination result in a decrease in blood brain

natriuretic peptide level in the subject as compared to the combination therapy of Claim 15.

41. The therapy of Claim 15 further characterized by administering said angiotensin converting enzyme inhibitor, aldosterone antagonist and loop diuretic in a sequential manner.

42. The therapy of Claim 15 further characterized by administering said angiotensin converting enzyme inhibitor, aldosterone antagonist and loop diuretic in a substantially simultaneous manner.

43. The therapy of Claim 15 wherein said aldosterone antagonist is a spirolactone-type compound.

44. The therapy of Claim 15 wherein said spirolactone-type compound is spironolactone.

45. The therapy of Claim 15 wherein said angiotensin converting enzyme inhibitor is selected from the group consisting of alacepril, benazepril, captopril, cilazapril, delapril, enalapril, enalaprilat, fosinopril, fosinoprilat, imidapril, lisinopril, perindopril, quinapril, ramipril, saralasin acetate, temocapril, trandolapril, ceranapril, moexipril, quinaprilat, spirapril, Bioproject BP1.137, Chiesi CHF 1514, Fisons FPL-66564, idrapril, Marion Merrell Dow MDL-100240, perindoprilat and Servier S-5590.

46. The therapy of Claim 15 wherein said angiotensin converting enzyme inhibitor is selected from the group consisting of alacepril, benazepril, captopril, cilazapril, delapril, enalapril, enalaprilat, fosinopril, fosinoprilat, imidapril, lisinopril, perindopril, quinapril, ramipril, saralasin acetate, temocapril, trandolapril, ceranapril, moexipril, quinaprilat and spirapril.

47. The therapy of Claim 15 further characterized by said angiotensin converting enzyme inhibitor and said aldosterone antagonist being used in said combination therapy in a weight ratio range from about 0.1-to-one to about twenty-five-to-one of said angiotensin converting enzyme inhibitor to said aldosterone antagonist.

48. The therapy of Claim 15 wherein said weight ratio range is from about 0.5-to-one to about fifteen-to-one.

49. The therapy of Claim 15 wherein said weight ratio range is from about 0.5-to-one to about five-to-one.

50. The therapy of Claim 15 wherein said angiotensin converting enzyme inhibitor is captopril, in a daily dose range from about 30 mg to about 80 mg per dose, or is enalapril in a dose range from about 5 mg to about 25 mg per dose.

51. The therapy of Claim 15 wherein said aldosterone antagonist is spironolactone in a daily dose range from about 1 mg to about 23 mg per dose.

52. The therapy of Claim 15 wherein said spironolactone daily dose is in a range from about 5 mg to about 20 mg.

53. The therapy of Claim 15 wherein said spironolactone daily dose is in a range from about 5 mg to about 15 mg.

54. The method of Claim 15 wherein the aldosterone antagonist is an epoxy-steroidal aldosterone antagonist.

55. The method of Claim 15 wherein the epoxy-containing compound has an epoxy moiety fused to the "C" ring of the steroidal nucleus of a 20-spiroxane compound.

56. The method of Claim 15 wherein the 20-spiroxane compound is characterized by the presence of a 9-alpha,11-beta-substituted epoxy moiety.

57. The method of Claim 15 wherein the epoxy-containing compound is selected from the group consisting of:

Pregn-4-ene-7,21-dicarboxylic acid, 9,11-epoxy-17-hydroxy-3-oxo-,γ-lactone, methyl ester, (7α,11α,17α)-;

Pregn-4-ene-7,21-dicarboxylic acid, 9,11-epoxy-17-hydroxy-3-oxo-dimethyl ester, (7α,11α,17α)-;

3'H-cyclopropa[6,7] pregna-4,6-diene-21-carboxylic acid, 9,11-epoxy-6,7-dihydro-17-hydroxy-3-oxo-, γ-lactone, (6β,7β,11β,17β)-;

Pregn-4-ene-7,21-dicarboxylic acid, 9,11-epoxy-17-hydroxy-3-oxo, 7-(1-methylethyl) ester, monopotassium salt, (7α,11α,17α)-;

Pregn-4-ene-7,21-dicarboxylic acid, 9,11-epoxy-17-hydroxy-3-oxo-, 7-methyl ester, monopotassium salt, (7α,11α,17α)-;

3'H-cyclopropa[6,7]pregna-1,4,6-triene-21-carboxylic acid, 9,11-epoxy-6,7-dihydro-17-hydroxy-3-oxo-, γ-lactone, (6α,7α,11α)-;

3'H-cyclopropa[6,7]pregna-4,6-diene-21-carboxylic acid, 9,11-epoxy-6,7-dihydro-17-hydroxy-3-oxo-, methyl ester, (6α,7α,11α,17α)-;

3'H-cyclopropa[6,7]pregna-4,6-diene-21-carboxylic acid, 9,11-epoxy-6,7-dihydro-17-hydroxy-3-oxo-, monopotassium salt, (6α,7α,11α,17α)-;

3'H-cyclopropa[6,7]pregna-4,6-diene-21-carboxylic acid, 9,11-epoxy-6,7-dihydro-17-hydroxy-3-oxo-, γ-lactone, (6α,7α,11α,17α)-;

Pregn-4-ene-7,21-dicarboxylic acid, 9,11-epoxy-17-hydroxy-3-oxo-, γ-lactone, ethyl ester, (7α,11α,17α)-; and

Pregn-4-ene-7,21-dicarboxylic acid, 9,11-epoxy-17-hydroxy-3-oxo-, γ-lactone, 1-methylethyl ester, (7α, 11α, 17α)-.

58. The method of Claim 15 wherein the aldosterone antagonist is eplerenone.

59. The method of Claim 15 wherein the aldosterone antagonist is eplerenone in a daily dose range from about 0.5 mg to about 500 mg.

60. The method of Claim 15 wherein the aldosterone antagonist is an aldosterone antagonist other than spironolactone.

61. A composition comprising an angiotensin converting enzyme inhibitor, an aldosterone antagonist, a loop diuretic and digoxin, and the pharmaceutically acceptable salts, esters and prodrugs thereof.

62. A composition of Claim 63 comprising:

a first amount of an angiotensin converting enzyme inhibitor, or a pharmaceutically acceptable salt, ester or prodrug thereof;

a second amount of an aldosterone antagonist, or a pharmaceutically acceptable salt, ester or prodrug thereof;

a third amount of a loop diuretic, or a pharmaceutically acceptable salt, ester or prodrug thereof;

a fourth amount of digoxin, or a pharmaceutically acceptable salt, ester or prodrug thereof; and

a pharmaceutically acceptable carrier;

wherein the first, second, third and fourth amounts in combination comprise a therapeutically effective amount of said inhibitor, antagonist, loop diuretic and digoxin.

63. A composition of Claim 64 wherein the aldosterone antagonist is spironolactone.

64. A composition of Claim 64 wherein the aldosterone antagonist is eplerenone.